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Bib Data Sheet

CONFIRMATION NO. 4658

SERIAL NUMBER 09/709,722	FILING DATE 11/13/2000 RULE	CLASS 349 345	GROUP ART UNIT 2871 2674	ATTORNEY DOCKET NO. 107263	
APPLICANTS Chiyoaki Iijima, Suwa-shi, JAPAN; Minoru Ikeda, Suwa-shi, JAPAN; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** JAPAN 11-320142 11/10/1999 ✓					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/29/2001					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <input checked="" type="checkbox"/> <i>[Signature]</i> <i>[Initials]</i> Examiner's Signature Initials		STATE OR COUNTRY JAPAN	SHEETS DRAWING 17	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 2
ADDRESS Oliff & Berridge PLC PO Box 19928 Alexandria, VA 22320					
TITLE Liquid crystal panel driving method, liquid crystal device, and electronic apparatus					
FILING FEE RECEIVED 876	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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BIBDATASHEET

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APPLICANTS

Chiyoaki Iijima, Ina-shi, JAPAN;

Minoru Ikeda, Matsumoto-shi, JAPAN;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

JAPAN 11-320142 11/10/1999 ✓

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35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials				

ADDRESS

25944
OLIFF & BERRIDGE, PLC
P.O. BOX 19928
ALEXANDRIA, VA
22320

TITLE

Liquid crystal panel driving method, liquid crystal device, and electronic apparatus

FILING FEE RECEIVED 1306	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____